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NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)

APPLICATION NUMBER: 09/619848

Total Fee Calculation

Fee Code	Total # Claims	Number Ests	X	Fee	Fee	Total
Sm./Lg.				Sm. Entry	L. Entry	
Basic Filing Fee	201/101			_____	<u>696</u>	_____
Total Claims > 20	201/101	<u>36</u>	-20-	<u>16</u>	X	_____
Independent Claims > 3	202/102	<u>5</u>	-1-	<u>2</u>	X	_____
Multi. Dep Claim Present	204/104			_____	_____	_____
Surcharge	205/105			_____	<u>130</u>	_____
English Translation	119			_____	_____	_____
<u>TOTAL FEE CALCULATION</u>						_____

Fees due upon filing the application:

Total Filing Fees Due = \$ 1264.00

Less Filing Fees Submitted - \$ 0

BALANCE DUE = \$ 1264.00

[Signature]
 Office of Initial Patent Examination

Figure 7

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 29, 1999

Application or Docket Number

09/619848

CLAIMS AS FILED - PART I

SMALL ENTITY TYPE OR

OTHER THAN SMALL ENTITY

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	36 minus 20 =	* 16
INDEPENDENT CLAIMS	5 minus 3 =	* 2
MULTIPLE DEPENDENT CLAIM PRESENT		

RATE	FEE
	345.00
X\$ 9=	
X39=	
+130=	
TOTAL	

RATE	FEE
760	-690.00
X\$18=	288
X78=	156
+260=	
TOTAL	1138

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

Pre A

(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total * 36	Minus ** 20	= 16
Independent * 5	Minus *** 3	= 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		

RATE	ADDITIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
710.00	
X\$18=	288.00
2X78=	156.00
+260=	
TOTAL ADDIT. FEE	1138.00

(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total *	Minus **	=
Independent *	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		

RATE	ADDITIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total *	Minus **	=
Independent *	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		

RATE	ADDITIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.